

## QUESTIONNAIRE - APPROPRIATION DATA

System: \_\_\_\_\_

Who should be called if we have any questions on this report?

Name: \_\_\_\_\_

Telephone No: (\_\_\_\_) (\_\_\_\_) – (\_\_\_\_)

**1A.** The Fiscal 2001 total pension appropriation enacted by your governmental unit(s). (This should include all units within your system, but should not include expenses.) \$ \_\_\_\_\_

**1B.** The scheduled appropriation for Fiscal Year 2002 . \$ \_\_\_\_\_

Please include the actuarial report from which these amounts were determined if you have not already submitted it to us.

**2A.** Any amounts received and credited to the Pension Fund under Section 3(8)(c) (Reimbursements from other systems for a portion of the pension of a retired member) and under Section 7(4)(b) (reimbursement for pension of member injured rendering authorized aid to other systems) for the period July 1, 1999 through June 30, 2000. \$ \_\_\_\_\_

**2B.** Any amounts paid by and charged to the Pension Fund under Section 3(8)(c) (Reimbursements to other systems for a portion of the pension of a retired member) and under Section 7(4)(b) (reimbursement for pension of member injured rendering authorized aid to other systems) for the period July 1, 1999 through June 30, 2000. \$ \_\_\_\_\_

**3.** The total amount of the cost-of-living payments granted between July 1, 1981 and December 31, 1997, for benefits payable during the period July 1, 1999 through June 30, 2000 which have been or will be reimbursed by the State. \$ \_\_\_\_\_

**4A.** The total amount of pension payments (include state funded COLA, but not annuities) made from the period July 1, 1999 through June 30, 2000. \$ \_\_\_\_\_

**4B.** Total annuity payments made from July 1, 1999 through June 30, 2000 \$ \_\_\_\_\_

**4C.** Total amount of benefit payments (4A +4B). \$ \_\_\_\_\_



7. Please give the amount approved by your board for expenses (including any supplemental budget increases) for fiscal 2001 (or most recent calendar year). Please enclose a copy of the approved budget, if available, or provide an estimate.

Administrative Expenses .....	\$ _____
Investment Related Expenses .....	\$ _____
Total Expense Fund Budget .....	\$ _____

8. Have you hired, or are you planning to hire, a private actuary to complete a January 1, 2001 valuation for the system? \_\_\_\_ If so, please indicate which firm \_\_\_\_\_.
9. Do you determine your governmental unit breakdown by determining actuarial liabilities and normal cost for each unit? \_\_\_\_ If so, please provide the applicable percentages and the fiscal year (or actuarial valuation date) established \_\_\_\_\_

### **CITIES AND TOWNS**

Please furnish us with the number of active members in your system and the aggregate annual rate of regular compensation for these members as of September 30, 2000. If your system contains units, such as a housing and/or redevelopment authority or a district, please furnish the information as to the number of members and their aggregate annual rate of regular compensation separately. (This does not mean departments within a city or town.) In the first section below, please include only those members whose salary is not paid by federal grant monies. In the second section, please include only those members whose salary is paid by federal grant monies. This second group will be used only for purposes of reconciliation, but will not have a pro-rata share of the Pension Fund appropriation. Instead, 9% of federal grants should be paid to the Pension Reserve Fund for them.

### **NON-FEDERAL GRANT EMPLOYEES**

UNIT	NUMBER OF MEMBERS	ANNUAL RATE OF COMPENSATION
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>TOTAL</b>		\$ <input type="text"/>

**FEDERAL GRANT EMPLOYEES**

UNIT	NUMBER OF MEMBERS	ANNUAL RATE OF COMPENSATION
TOTAL		\$

**COUNTY AND REGIONAL SYSTEMS**

Please list on a separate sheet the units comprising your system with the total aggregate annual rate of regular compensation and the number of active members who are not paid by federal grants for each unit as of September 30, 2000. In addition, please compile a comparable list for those members who are paid by federal grants. This second group will be used only for purposes of reconciliation, but will not contribute any part of the Pension Fund appropriation. Instead, a contribution of 9% of federal grants should be paid to the Pension Reserve Fund for them.